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Atty. Dkt. No. 035451-0125 (3620.Palm)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants:

Blight et al.

Title:

MOBILE COMMUNICATION SYSTEM FOR LOCATION

AWARE SERVICES

Appl. No.:

To Be Determined

Filing Date:

05/30/01

Examiner:

To Be Determined

Art Unit:

To Be Determined

UTILITY PATENT APPLICATION TRANSMITTAL

Commissioner for Patents Box PATENT APPLICATION Washington, D.C. 20231

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

David Blight 460-304 Oak Grove Drive Santa Clara, CA 95054

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Enclosed are:

- [X] Specification, Claim(s), and Abstract (34 pages).
- [X] Informal drawings (3 sheets, Figures 1-3).
- [X] Declaration and Power of Attorney (4 pages).
- [X] $\sqrt{$ Assignment of the invention to Palm, Inc.

- [X] Assignment Recordation Cover Sheet.
- [X] Check in the amount of \$40.00 for Assignment recordation.
- [] Small Entity statement.
- [] Request for application not to be published with certification under 35 USC 122(b)(2)(B)(i).
- [X] Information Disclosure Statement.
- [X] Form PTO-1449 with copies of 3 listed reference(s).
- [] Application Data Sheet (37 CFR 1.76).

The filing fee is calculated below:

	Claims as Filed		Included ir Basic Fee		Extra Claims		Rate		Fee Totals
Basic Fee				_			\$710.00		\$710.00
Total Claims:	26	-	20	=	6	×	\$18.00	=	\$108.00
Independents:			3	- =	5	- ×	\$80.00	=	\$400.00
If any Multiple Dependent Claim(s) present: + \$270.00							=	\$0.00	
,	•						SUBTOTAL:	=	\$1218.00
[]	Small	Small Entity Fees Apply (subtract ½ of above): TOTAL FILING FEE:							\$0.00
	Sirian								\$1,218.00

- [X] A check in the amount of \$1,218.00 to cover the filing fee is enclosed.
- [] The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- [X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date May 30, 200)
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